LESSONS REGISTRATION FORM

Participant name	Youth: Date of birth/ Age
Address	City State Zip
Home telephone Work teleph	none
E-mail address	
Please list any special needs or disabilities the enrolling participa	ant may have:
DOWNHILL SKI LEVEL: ☐ Kinderski ☐ Never Evers ☐ LV	'LI DIVLII DIVLIII DIVLIV DIVLV DIVLVI
SNOWBOARD LEVEL: LVL A LVL B LVL C] LVL D
1st Class Choice: Day Time	Rental Equipment Needed: Yes No
2nd Class Choice: Day Time	If yes, Shoe Size: Adult / Child (circle one). Height
Lesson fee: \$ + equipment rental rate for lessons \$_	= Total enclosed \$
CROSS COUNTRY SKI: ☐ Introduction ☐ Beginner ☐ In	termediate/Advanced
Lesson fee: \$ X number of lessons + equipmer	nt rental rate for lessons \$ = Total enclosed \$
Payment: \square Cash \square Check \square VISA \square Mastercard	☐ American Express ☐ Discover
Credit Card # Expiration	n Date: / Card Holder Name:
	le to: City of Saint Paul
Online	
	STRATION FORM // Age
Address	City State Zip
Home telephone Work teleph	ione
E-mail address	
Please list any special needs or disabilities the enrolling participa	nt may have:
DOWNHILL SKI LEVEL: □ Kinderski □ Never Evers □ LV	'LI DIVLII DIVLIII DIVLIV DIVLV DIVLVI
SNOWBOARD LEVEL: LVL A LVL B LVL C	ILVL D
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Payment: ☐ Cash ☐ Check ☐ VISA ☐ Mastercard	☐ American Express ☐ Discover
Credit Card # Expiration	Date: / Card Holder Name:
Make checks payab	le to: City of Saint Paul

Discover the Benefits. . . Recreating together builds strong families

Online